

Decision Rules for Calculating the Measure Selection Criteria Scores
September 24, 2014

Background: The three workgroups (Prevention, Acute Care, and Chronic Illness) have identified measures of interest in their respective areas and now need to prioritize each measure list and narrow it down to a maximum of 15 measures. In order to facilitate this process, Bailit has used the *Buying Value Measure Selection Spreadsheet* to calculate Measure Selection Criteria Scores for each of the measures. The Measure Selection Criteria Scores represent the extent to which each measure adheres to the measure selection criteria identified by legislation and the Performance Measurement Coordinating Committee. If the measure is consistent with the criterion, it receives a “yes” and is granted 2 points, if the measure is partially consistent with the criterion, it receives a “somewhat” and is granted 1 point, and if the measure is inconsistent with the criterion, it receives a “no” and is not awarded any points. These points are summed to produce a total Measure Selection Criteria Score. The measures that are most consistent with the Selection Criteria receive higher scores and those that are less consistent with the Selection Criteria receive lower scores. This document outlines the decision rules used to make a preliminary assessment of the “yes” measures against each criterion.

Decision rules used in assessing measures against Washington’s measure selection criteria:

Criterion	Decision Rules		
	Yes	Somewhat	No
Based on readily available data	The measure is claims-based, or there is another data source that is readily available (e.g., CMS Hospital Compare)	There is a source of data but there is some question about the completeness of data available (e.g., WA IIS) or the data is only available for only one unit of analysis (e.g., health plan only)	A source of data is not readily available in the state of Washington.
Nationally-vetted	The measure is a HEDIS measure, a CMS measure and/or is NQF- endorsed	Not applicable	The measure is not a HEDIS or CMS measure nor is it NQF endorsed.
Aligned with measures in other WA and national measure sets	The measure appears in three or more measure sets used in the State of Washington	The measure appears in two measure sets used in the State of Washington	The measure appears in one or no measure sets in the State of Washington

Criterion	Decision Rules		
	Yes	Somewhat	No
Significant potential to positively impact health outcomes: <i>measures with available benchmark information or an explicit state performance goal</i>	There is an opportunity for improvement relative to benchmark (the performance of Commercial and Medicaid plans in Washington falls at least 5 points below the national 90 th percentile) or relative to the state's performance goal.	There is some opportunity for improvement relative to benchmark (the performance of Commercial and Medicaid plans in Washington is near the national 90 th percentile) or the state's performance goal.	There is little opportunity for improvement relative to benchmark (the performance of Commercial and Medicaid plans in Washington is at or above the national 90 th percentile) and/or is close to 100% performance.
Significant potential to reduce costs	There is research suggesting that the measure is cost-effective (e.g., the GAO report on Health Prevention: Cost-effective Services in Recent Peer-Reviewed Health Care Literature)	There is some evidence suggesting that the measure has potential to reduce costs.	There is no evidence suggesting the measure has the potential to reduce costs.
Sufficient denominator size	There is likely to be sufficient denominator size based on knowledge of the prevalence of the condition/ procedure at the unit of analysis to be assessed. For measures included in Hospital Compare, at least 75% of the Washington hospitals report the measure.	It is unclear whether there will be sufficient denominator size based on knowledge of the prevalence of the condition/ procedure at the unit of analysis to be assessed. For measures included in Hospital Compare, between 26% and 74% of the Washington hospitals report the measure.	There is likely to be insufficient denominator size based on knowledge of the prevalence of the condition/ procedure at the unit of analysis to be assessed. For measures included in Hospital Compare, between less than 25% of Washington hospitals report the measure.

Criterion	Decision Rules		
	Yes	Somewhat	No
If provider-focused, the provider can impact the outcome	The measure is a process measure that assesses something that occurs in the provider's office.	It is unclear whether the provider will be able to have a meaningful impact on the outcome.	The provider will not be able to meaningfully impact the outcome.

